

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Richard Rubin

Serial No.:

09/664,885

Filed:

19 September 2000

Ex: Garbe, S.

Art Unit: 3727

For:

INSULATED  
CONTAINER

FOOD

## RESPONSE, AMENDMENT AND REQUEST FOR RECONSIDERATION

Honorable Commissioner of  
Patents and Trademarks  
Washington, D.C. 20231  
BOX NON-FEE AMENDMENT

Dear Sir:

This is a response to the Office Action mailed 13  
Sept. 2002 in this case. A shortened statutory period for  
response was set for 3 months, up to and including 13  
December 2002.

11/C  
K. Colf  
12/18/02

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richard Rubin )  
Serial No.: 09/664,885 ) Ex.: GARBE  
Filed: 19 September 2000 ) Art Unit: 3727  
Title: INSULATED FOOD CONTAINER )

## CERTIFICATION OF FACSIMILE TRANSMISSION

Honorable Commissioner of  
Patents and Trademarks  
Washington, D.C. 20231

Dear Sir:

I hereby certify that this correspondence, consisting of Amendment Transmittal Form; and Response, Amendment and Request for Reconsideration, twenty-two (22) pages is being facsimile transmitted to the Patent and Trademark Office (Fax. No. 703-872-9302) on the date shown below.

Robert A. Parsons  
Signature

13 December 2002  
Date

13 December 2002

Respectfully Submitted,

Robert A. Parsons

Robert A. Parsons  
Attorney for Applicant  
Reg. No. 32,713

340 East Palm Lane  
Suite 260  
Phoenix, Arizona 85004  
(602) 252-7494

Case Docket No. 4138-AIRCE

Applicant: Richard Rubin )

Serial No.: 09/664,885 )

Filed: 19 September 2000 )

Title: INSULATED FOOD CONTAINER )

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above identified application.

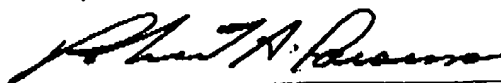
☒ Small entity status is claimed by applicant☐ Design Application, no additional fee required.☒ Utility application, fee calculated on table below.

The fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No Previously Paid For	Present Extra	Small Entity	Large Entity
TOTAL	20 -	20	0	X 9 = \$0	or X 18 = \$
INDEP	3 -	3	0	X 42 = \$0	or X 84 = \$
MULTIPLE DEPEND CLAIM PRESENTED				X140 = \$0	or X280 = \$
				TOTAL	or TOTAL \$
				\$	

☐ Please charge the Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.☐ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. \_\_\_\_\_.☐ A duplicate copy of this transmittal sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ is attached.

Respectfully submitted,



Robert A. Parsons, Reg. No. 32,713

DATE

12/13/02